

## **Application Data Sheet**

### **Application Information**

Application Type::	Continuation
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	Yes
Computer Readable Form (CRF)?::	Request transfer
Number of copies of CRF::	
Title::	MAIZE METALLOTHIONEIN GENE AND PROMOTER
Attorney Docket Number::	035718/271431
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	3
Small Entity::	No
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Wesley B.  
Family Name:: BRUCE  
Name Suffix::  
City of Residence:: Urbandale  
State or Province of Residence:: IA  
Country of Residence:: US  
Street of mailing address:: 4625 96th Street  
City of mailing address:: Urbandale  
State or Province of mailing address:: IA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 50322

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Steven W.  
Family Name:: RITCHIE  
Name Suffix::  
City of Residence:: Granger  
State or Province of Residence:: IA  
Country of Residence:: US  
Street of mailing address:: 10837 N.W. 105th Court  
City of mailing address:: Granger  
State or Province of mailing address:: IA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 50109

**Correspondence Information**

Correspondence Customer Number:: 29122

**Representative Information**

Representative Customer Number:: 00826

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/520,268	03/07/00
which is a	Non-Provisional of	60/123,510	03/08/99

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
			NO
			NO

**Assignee Information**

Assignee name:: Pioneer Hi-Bred International, Inc.  
Street of mailing address:: 800 Capital Square, 400 Locust Street  
City of mailing address:: Des Moines  
State or Province of mailing address:: IA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 50319

(If there is more than one assignee, repeat information for each one.)

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